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June 1, 2006

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Re: In re Application of: Hovanes et al.  
Serial No.: 10/631,019  
Filed: July 30, 2003  
For: System And Method For Controlling Pressure  
In A Surgical Tourniquet  
Attorney Docket No.: 99-40049-US-C5

Dear Sir:

Enclosed for filing is a response to the Office Action which has a mailing date of December 1, 2005 in the above-entitled invention. The following documents are submitted herewith:

- 1) Response to Office Action dated ; and
- 2) A self-addressed stamped return receipt postcard

EXPRESS MAIL CERTIFICATE (37 C.F.R. 1.10)

Express Mail Label No. EV 481 405 786 US

Date of Deposit June 1, 2006

I hereby certify that this paper, and the papers and/or fees referred to herein as transmitted, submitted or enclosed, are being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Name

Dolores A Springfield

Signature

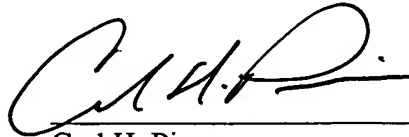
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The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment in connection with this filing to Deposit Account No. 18-0586

Respectfully submitted,

A handwritten signature in dark ink, appearing to read 'C.H.P.', is written over a horizontal line.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Hovanes et al. : Group Art Unit: 3731  
U.S. Application No: 10/631,019 : Examiner: Truong, Kevin T.  
Filing Date: July 30, 2003 : Docket No.: 99-40049-US-C5

For: **SYSTEM AND METHOD FOR CONTROLLING PRESSURE IN A  
SURGICAL TOURNIQUET**

**AMENDMENT AND RESPONSE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This paper is in response to the Office Action mailed March 1, 2006 in the above-identified patent application which was assigned a shortened statutory period, set to expire June 1, 2006. Accordingly, Applicant deems this Amendment and Response timely filed.

Should there be any additional fees due and owing, or being paid in excess of any required amount, with respect to this application, the Examiner is authorized to charge such fees or to credit such overpayment to deposit account no. 18-0586.

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Name Hovanes A. Springate

Signature Hovanes A. Springate